

Pregnancy Maintenance Initiative (PMI) 2015-2016

Date Generated: 03/13/2015

Family Life Services

Period: 07/01/2015 - 06/30/2016

Filter(s): Family Life Services

Grouping A - Administration and Management

Goal: A.1 - Capacity building and accountability

Status: 0% Complete

Attachments: IRS letter; Organizational Chart

Attach proof of Non-Profit Status (501(c)(3))

List staff names, positions and email addresses.: 1. Tim Durham, M. Ed, Executive Director, fls@hit.net
2. Charla Myrick, RN, Program Coordinator, charlamy88@gmail.com
3. Janic Sorrell, Bookkeeper, canhandledis4!@yahoo.com
4. Dawn Montgomery, Sonogram tech, dawnann65@gmail.com
5. Elliot Jackson, CPA, ejackson@ptsjcpas.com

Summarize your staff management plan to include verification of staff licensure, staff orientation, performance appraisal process and professional development plan.: Since FLS is an adoption agency, we are required to have an annual inspection during which we provide proof of current licensure for each worker, current annual work reports, and proof of any continuing education/training. This information is part of the permanent folder that contains any documentation concerning the agency's adoption license. A copy of this information is also kept with PMI staff information.

Staff orientation is supervised by the director in this way: Any new worker will have approximately 6 (50 minute) face-to-face meetings in the first 10 days with the director who will help the worker to understand the particular policies of this agency as well as common confidential policies. Part of this process includes reading and filling out a notebook (Employee Manual) which details policy with a self test at the end.

The professional development plan is unique for each employee but there is a basic information that is common to each. This information is housed with the file that holds other employment information and the performance report. Generally, employees are encouraged to attend seminars and other continuing education to keep their licensure and add to their personal file of professional accomplishment.

Attach an Organizational Chart in the attachment section above

Did you attach an Organizational Chart in the attachment section?: Yes

Strategy: A.1.1 - Build internal capacity

Status: 0% Complete

Requirement: A.1.1.1 - Attend annual meeting/training provided by KDHE

Status: 0% Complete

Requirement: A.1.1.2 - Provide orientation and training of new staff

Status: 0% Complete

Requirement: A.1.1.3 - Develop a method for recruiting selecting, and training staff

Status: 0% Complete

Strategy: A.1.2 - Communicate and coordinate local work with State staff

Status: 0% Complete

Requirement: A.1.2.1 - Submit Affidavit of Expenditures and Client Demographic Summary quarterly

Status: 0% Complete

Requirement: A.1.2.2 - Submit Narrative Report mid-year (for first six months) and annually (for 12 month period)

Status: 0% Complete

Requirement: A.1.2.3 - Participate in site visits and technical assistance calls as requested by the State

Status: 0% Complete

Goal: A.2 - Program evaluation

Status: 0% Complete

Attachments: Client Survey; Pager 2 of survey

Summarize your program evaluation methods to include how you will expand services to meet community needs.: Since we have weekly staff meetings, we keep up with current numbers as well as problems or issues that come up and these issues are dealt with in a timely fashion. Recordkeeping, case management, and all public events are routinely updated as the Program Coordinator, Charla Myrick, reports to the Agency Director, Tim Durham, as per a weekly schedule (Thursday morning). In keeping with regulations since 2001, records are kept up to date to be reported as part of the compliance for the grant to DCF. It is reasonable and helpful for us to have up-to-date figures to report to the churches and social service organizations which support our work. In addition, we have an exit interview that is used to evaluate our personal impact on the clients. We can also correlate history of drug use, prenatal care, and birth weights with participation in the program, compare them to those not in the program and infer a positive effect. We have substantial qualitative information and quotes from clients encouraging us and helping us to identify how to improve delivery of services.

We will continue to inform new doctors and nurses while we remind those who have been made aware of our program. We also speak routinely at churches and community organizations, advertise online and in the local phone books. We have many public events and seminars, and recently hosted the weekly morning Chamber of Coffee meeting. Out of a field of about 50 non-profits, FLS received the non-profit annual award (Star Award) recently which was presented publically at the annual Chamber banquet which was covered by the local paper. A local dentist recently had a "free day" during which people donated whatever they could to the free service. The funds were donated to FLS and this was covered by the local paper as well. This agency advertises routinely via newsletter, newspaper, radio, and pamphlets which are left at clinics, offices, and used at health fairs and women's fairs. For the last two years, the director was the chairperson of the Cowley County Healthy Communities Coalition and the nurse attends various meetings of medical staff and social workers call the "Third Thursday" group. Our nurse is also the chairperson of the Family and Consumer Sciences Committee for the Cowley County Extension Office. In addition to all of this ongoing activity, the agency has a yearly banquet where we thank volunteers and update approximately 250 supporters about recent work and progress.

Estimate the total number of women to be served during the grant period.: Circa 150

Attach a Client Satisfaction Survey in the attachment section above

Did you attach a Client Satisfaction Survey in the attachment section?: Yes

Strategy: A.2.1 - Develop a program assessment process to ensure services are provided as proposed

Status: 0% Complete

Requirement: A.2.1.1 - Develop and use a client satisfaction survey

Status: 0% Complete

Requirement: A.2.1.2 - Develop and maintain program policies and procedures that are based on program standards and guidelines.

Status: 0% Complete

Strategy: A.2.2 - Create and maintain a functioning advisory group

Status: 0% Complete

Requirement: A.2.2.1 - Composition of the advisory group will reflect the community (race, ethnicity, SES)

Status: 0% Complete

Requirement: A.2.2.2 - Regular meetings will be held and minutes of the meeting kept

Status: 0% Complete

Grouping B - Data and Information

Goal: B.1 - Measure program impact**Status:** 0% Complete

How will you measure effectiveness of services, interventions and referral networks?: We must keep detailed records of the outcomes of our interactions with the clients. As we record outcomes, we can correlate the data concerning birth weights, drug use, educational experience, and domestic violence with what we know about clients who have not experienced our services (and did not receive adequate prenatal care). This allows us to infer from the data how a reasonable difference can be quantified. We can also compare the information during the intake and compare that to the clients' characteristics after being in the program for some time. Thirdly we use a lot of qualitative information such as what clients give us informally that articulates their thankfulness and satisfaction with the entire process.

How will you ensure services provided are those needed by clients?: When clients are referred to us, most of them qualify themselves by showing up to receive services. In other words, their need is self-evident. We must have proof of pregnancy to avoid any confusion with regard to this process and provide free pregnancy tests for that purpose. In addition, the application is quite detailed and gives us a great deal of information about the client such as identifying information, their description of their situation, specific needs and goals. Part of the intake process is a face-to-face interview given by the RN to further identify problems and verify that the client is indeed in the right place to receive the services she actually needs.

Strategy: B.1.1 - Develop an evaluation tool to measure program effectiveness**Start Date:** 07/01/2015**End Date:** 06/30/2016**Status:** 0% Complete**Requirement: B.1.1.1 - Gather and use data to plan and evaluate interventions and referral networks****Status:** 0% Complete**Requirement: B.1.1.2 - Gather and use data to assess program impact****Status:** 0% Complete**Grouping D - Interventions to Improve Public Health****Goal: D.1 - Provide services to enable pregnant women to carry their pregnancies to term****Status:** 0% Complete

Describe services to be provided to pregnant women that will enable them to carry their pregnancies to term.: The main purpose of the "Healthy Beginnings Program" (the name for our local PMI program) is to provide free, one-on-one prenatal health and safety education. Another main objective is to assist with making life goals and lifestyle choices in important areas including domestic abuse and protection and parenting education. Because a substantial part of our program is infant safety, we plan for each mother to earn a new crib, a new car seat and a health kit. Charla Myrick, our RN, meets weekly with clients for a private 50 minute appointment, using state-of-the-art DVDs, models, and curriculum. The nurse coordinates services with doctors, OB nurses, and other social service organizations to optimize care. This program does not charge clients for any equipment; it is all "earned" through participation in the program as client are paid "Mommy Money" they can earn, save, and spend in the Mommy Store. This system has been extremely successful to encourage participation as well as promote goal-planning to obtain equipment, clothes and the other supplies they need. Individuals and organizations who donate to the Mommy Store seem to strongly approve that the providing of equipment and supplies is tied to the educational component of the program.

Describe the adoption services and pregnancy education to be provided as part of the program.: Family Life Services has been a licensed adoption agency (# 746-1) since 1984 and the current director has been administering adoption services since 1991. Since staff does not need to refer to another agency, service delivery for adoption-minded clients is streamlined, immediate, and easy to understand. We incorporate the use of videos, workbooks, and curriculum to encourage the client to fulfill her own placement plan. The most important component, however, is the great care that is given toward building a strong personal relationship with each client that is professional and respectful. We have working agreements with doctors and attorneys to make sure that the process is efficient (medically and legally) but always mindful of the emotional component of making an adoption plan.

Estimate number of pregnant women to be served in grant period.: 90

Strategy: D.1.1 - Assure that no individuals unable to pay will be denied pregnancy maintenance services**Status:** 0% Complete**Requirement: D.1.1.1 - Have on file written protocols that clearly outline how the local pregnancy maintenance services are to be implemented****Status:** 0% Complete

Strategy: D.1.2 - Adoption services and pregnancy education will be part of the program

Status: 0% Complete

Requirement: D.1.2.1 - Case managers to attend adoption training class

Status: 0% Complete

Requirement: D.1.2.2 - Provide plan for providing adoption as an option

Status: 0% Complete

Requirement: D.1.2.3 - Provide adequate resources and referrals

Status: 0% Complete

Goal: D.2 - The program shall not perform, promote or refer for education in favor of abortion.

Status: 0% Complete

Can you provide assurances that the program will not perform, promote or refer for education in favor of abortion?: Yes

Select all counties to be served below

County: Chautauqua; Cowley; Sumner

Strategy: D.2.1 - Provide assurances

Status: 0% Complete

Grouping E - Communications and Promotions

Goal: E.1 - Increase public awareness of services and generate buy in

Status: 0% Complete

How will you promote your Pregnancy Maintenance Initiative (PMI) services to the community?: We promote though:

1. Radio (2 local stations)
2. Local newspaper
3. Public speaking at service organizations
4. Special advertising (such as print ads on prescription sacks and bench ads)
5. Personal visits and presentations to churches, schools, counselors, and social service organizations
6. Providing pamphlets at clinics, churches and schools
7. Planning and attending health fairs and women's fairs
8. Participating in various community and health organizations
9. Providing public seminars (such as suicide prevention)
10. Having an internet presence on facebook and on the website, flsonline.net
11. Placing adds in three local phone books

What are your planned outreach activities?: Some of our planned outreach activities include: 1. Hosting nutrition meetings in conjunction with the Cowley County Extension Office and Mid-Kansas Community Action Program 2. Having fundraisers during local events 3. Having an annual banquet 4. Hosting Chamber of Commerce morning coffees 5. Presenting at the local Community College (Cowley College) at Ethics and Psych classes 6. Hosting financial seminars (budgeting classes) 7. Hosting Car Seat Safety education with Cowley County Health Department 8. Having a fall fundraiser/open house in conjunction with the yearly Arkansas City Arkalalah fall festival 10. Teach parenting seminar for clients in Kansas Works for Success program at the local library

Strategy: E.1.1 - Promote services to community

Status: 0% Complete

Strategy: E.1.2 - Planned outreach activities

Status: 0% Complete

Strategy: E.1.3 - Target and recruit clients

Status: 0% Complete

Grouping F - Partnerships

Goal: F.1 - Collaborative partnerships with community providers**Status:** 0% Complete

Who are your key community partners and their role in providing PMI-related services?: 1. Ark City Clinic, Arkansas City, KS (Prenatal, birthing, and postnatal Medical Care, Adoption coordination)
2. South Central Kansas Regional Medical Center, Arkansas City, KS (Prenatal, birthing, and postnatal Medical Care, Adoption coordination)
3. South Central Kansas Clinic (Prenatal, birthing, and postnatal Medical Care, Adoption coordination)
4. Sunflower Ob/Gyn (Prenatal, birthing, and postnatal Medical Care, Adoption coordination)
5. William Newton Memorial Hospital, Winfield, KS (Prenatal, birthing, and postnatal Medical Care, Adoption coordination)
6. Cowley County Health Department (WIC, Car Seat Safety, Birth Control, Prenatal Medical, Well Child Check-ups)
7. Cowley County Extension Agency (Nutrition/cooking classes)
8. Mid-Kansas Community Action Program (Nutrition/cooking classes, Housing assistance, Utility assistance, Budgeting, Fuel cost assistance)
9. KanCare (Health Insurance, transportation for medical appointments, 24 hour Nurse line)
10. DCF (Food Stamps, Cash assistance)
11. Kansas Breastfeeding Coalition (Support for Breastfeeding moms)

When referring for services outside the program, what are the processes for initial referrals and for follow-up after referral?: Before any referral is acted upon, a client must sign a document which articulates the parameters of the action and is kept on file. The referral activity is followed up with a procedure (basically putting it on a regularly-updated, confidential calendar) whereby contact is made by phone or in person (within 14 days) to the agency to which the client was referred.

Strategy: F.1.1 - Build and maintain local partnerships**Status:** 0% Complete**Requirement: F.1.1.1 - Develop and maintain collaborative partnerships with community providers of related services****Status:** 0% Complete**Requirement: F.1.1.2 - Develop referral sources for related services****Status:** 0% Complete**Requirement: F.1.1.3 - Track referrals made and outcomes of those referrals****Status:** 0% Complete